



Student Suicide Prevention Plan

PENDLETON SCHOOL DISTRICT

DEVELOPED USING RESOURCES FROM WILLAMETTE ESD, LINES FOR
LIFE, AND OREGON YOUTHLINE

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Introduction

Public Schools play a major role in the prevention of suicide for school age youth. The U.S. Surgeon General promoted the adoption of suicide prevention protocols by local school districts. Additionally, the Oregon State Legislature passed Senate Bill 52 also known as Adi's Act requiring districts to adopt policies, develop, and implement plans for suicide prevention, intervention, and post crisis response. Pendleton School District adopted policy [JHH](#) and [JHH-R](#) that outline our district plan to meet the requirements of SB 52. The plan outline mirrors our board policy and provides specific information to staff, students and our community on how we will work to prevent suicide, intervene when necessary, and respond in the event of a crisis.

Our schools all have strengths and resources unique to the school context and student needs. The intent of this plan is to align our resources and build on each school's strengths. Each school has a team of staff (typically an administrator, counselor or Child Development Specialist, and/or building leadership team) responsible for ensuring implementation of this plan.

Quick Notes: What Schools Need to Know

- School staff are frequently considered the first line of contact in reaching students at risk for suicide
- All school staff are responsible for taking reasonable and prudent actions to help at risk students NOT providing the in-depth assessment or counseling that a qualified professional provides.
 - Reasonable and prudent actions may consist of notifying parents, making a referral, securing outside assistance, staying with someone until help arrives, etc.
- All school staff share the responsibility of knowing protocols exist to refer a student at risk of suicide to trained professionals
- Research indicates talking about suicide or asking someone if they feel suicidal or are having thoughts of suicide will NOT put the idea in someone's head
- Peers often know, but do not tell adults, about peers contemplating suicide because they do not know how adults will respond or think they can't help
- School staff, families, and students need to be confident that help is available if/when they raise a concern regarding suicide.
- Even with a comprehensive suicide prevention and intervention plan, not all suicidal behavior can be prevented
- Advanced planning is critical to provide an effective crisis response that provides internal and external resources to address student issues and normalize the learning environment.

Prevention

Suicide/Self-Harm prevention strategies may include, but are not to be limited to, efforts to promote a positive school climate that enhances students' feelings of connectedness with the school and each other, and is characterized by caring staff and harmonious interrelationships among students. Pendleton School District uses a multi-tiered system of support to provide instruction for Social Emotional and Resilience Skills through core instruction for all, targeted intervention and intensive support based on the needs of students. School data teams meet regularly to discuss student needs and develop additional supports.

Student Health Education Program

The district's comprehensive health education program will promote the healthy mental, emotional, and social development of students including, but not limited to, the developmental problem solving-skills, coping skills and self-esteem. Developmentally appropriate suicide prevention instruction will be incorporated into the health education curriculum and designed to help students:

- Identify and analyze signs of depression and self-destructive behaviors and understand how feelings of depression, loss, isolation, inadequacy and anxiety can lead to thoughts of suicide;
- Identify alternatives to suicide/self-harm and develop coping and resiliency skills:

- Learn to listen, share feelings and get help when communicating with friends who show signs of self-harm or suicidal intent, and
- Identify trusted adults, school resources, and/or community crisis intervention resources where youth can get help and recognize that there is no stigma associated with seeking mental health, substance abuse and/or suicide/self-harm prevention services.

Instructional and Promotional Resources		
Resource Name	Topics Covered	Grades
Conscious Discipline ®	self-regulation, problem solving, coping skills, positive class and school community, and resilience	K-12
Youthline	School Signage, Student Awareness materials, and Social Media information appropriate to the age level at each building	K-12
Character Strong ®	self-awareness, self-management, social awareness, relationship skills and responsible decision making; promotes patience, kindness, honesty, respect, selflessness, forgiveness, commitment and humility	K-8
Second Steps ®	self-awareness, self-management, social awareness, relationship skills, and responsible decision making	K-5
Child Development Developed lessons	developmentally appropriate suicide awareness and prevention	K-5
The Great Body Shop ®	Self Worth, Mental and Emotional Health	K-5
Look Listen Link ®	stress management, anxiety, depression, and suicide prevention with adolescent youth	6-8
Integrated health units	stress management, anxiety, depression, and suicide prevention with adolescent youth	9-12

Student Responsibility

The district will encourage students to notify a teacher, principal, or counselor or other adult when they are experiencing depression or thoughts of suicide/self-harm or when they suspect or have knowledge of another student's despair, self-harm or suicidal intentions. Each school works to create a safe environment where students feel they can freely express feelings and concerns to any staff member.

Staff Training

The district's suicide/self-harm prevention training will help staff identify and respond to students at risk of suicide/self-harm.

Training may include:

- Identifying risk factors such as previous suicide/self-harm attempts, history of depression or mental illness, substance use problems, bullying and harassment, family history of suicide or violence, feelings of isolation, interpersonal conflicts, a recent severe stressor or loss, family instability and other factors;
- Warning signs that may indicate self-harm or suicidal intentions, including changes in students; appearance, personality or behavior;
- School and community resources/services; and
- District procedures for intervening when a student attempts, threatens, discloses the desire to commit suicide or displays other indicators related to self-harm.

Specific Staff Training and Resources:

- Annual SafeSchools ® training each fall on suicide awareness, prevention and intervention
- Periodic Staff Meeting Refresher
- Mental Health First Aid offered periodically through our partners
- QPR offered periodically through our partners

- ASIST ® training for counseling and administrative staff on a regular schedule with refresher training in between.
- The Pendleton School District Suicide Prevention, Intervention and Crisis Response Guide

Principal/Designee Prevention Planning

School administrative teams will designate specific individual(s) to be promptly contacted regarding self-harm or a suicide threat including the school counselor, psychologist, nurse, superintendent, the student’s parent/guardian and, as necessary, local law enforcement or mental health agencies. The principal or counselor will develop a reentry plan, including a student/staff support plan for use after a suicide attempt.

Suicidal Behavior Risk + Protective Factors	
Risk Factors	Protective Factors
<ul style="list-style-type: none"> ● Current plan to kill self ● Current suicidal ideation ● Access to means to kill self ● Previous suicide attempts ● Family history of suicide ● Exposure to suicide by others ● Recent discharge from psychiatric hospitalization ● History of mental health challenges ● Current drug/alcohol use ● Sense of hopelessness ● Self-hate or self-injurious behavior ● Current psychological/emotional pain ● Loss (relationship, work, financial) ● Relationship issues (friends/family/school) ● Feeling isolated/alone ● Current/past trauma ● Bullying ● Discrimination and lived experience with oppression ● Chronic pain/physical health problems ● Impulsive or aggressive behavior ● Unwilling to seek help ● Members of disproportionately at-risk groups (LGBTQ+, Black, Indigenous, People of Color, etc) 	<ul style="list-style-type: none"> ● Engaged in effective physical and/or mental health care ● Feeling connected to others (family, friends, school, at least one trusted adult) ● Positive problem solving skills ● Healthy coping skills ● Restricted access to means to kill self ● Stable living environment ● Willing to access support/help ● Positive self esteem ● Resiliency ● High frustration tolerance ● Emotional regulation ● Cultural and/or religious beliefs that discourage suicide ● Successful at school ● Has responsibility for others ● Financial stability ● Future planning ● Acceptance of identity (family, peers, school) <p style="background-color: yellow;">KEEP IN MIND: a person with an array of protective factors in place can still struggle with thoughts of suicide. It is important to consider this when conducting a risk assessment.</p>

Intervention

Whenever a staff member suspects or has knowledge of a student’s suicide/self-harm or suicidal intentions he/she will take proper steps to support the student, promptly notify the principal or school counselor and request that appropriate school staff conduct an initial risk interview. The principal or counselor will then notify the student’s parents/guardians as soon as possible, unless notification of the parents will jeopardize the student’s safety. The district may also refer the student to mental health resources in the community. Additionally, the principal or designee will ensure the student’s physical safety by one of the following as appropriate:

- Secure immediate medical treatment if a suicide attempt has occurred;
- Secure emergency assistance if a self-harm or suicidal act is being actively threatened;
- Keep the student under continuous adult supervision until the parent/guardian and/or appropriate support agent or agency can be contacted and has the opportunity to intervene;
- Document the incident and disposition in writing as soon as feasible;
- Follow-up with the parent/guardian and student, in a timely manner, to provide referrals to appropriate services as needed;
- Provide access to counselors or other appropriate personnel to listen to and support students and staff who are directly or indirectly involved with the incident; or

- Provide an opportunity for all who respond to the incident to debrief, evaluate the effectiveness of the strategies used and make recommendation for future actions.

Take it Seriously	Take Action	Stay With Them
<ul style="list-style-type: none"> • Any indicator • Every Time 	<ul style="list-style-type: none"> • Call 911 for imminent danger • Call or Take them to the school counselor or administrator 	<ul style="list-style-type: none"> • Do not leave them alone • If they leave or won't stay with you seek help immediately

Potential Warning Signs

Students trust and respect school staff. This means school staff may be the first to hear and recognize potential warning signs that a child may need help or may be considering suicide. There is no definitive list of warning signs. The table below lists some of the potential warning signs warranting a referral to the school counselor and principal.

WARNING SIGNS	
This list is not exhaustive of all possible warning signs	
Ideation-Thoughts of Suicide	Expressing suicidal feelings through talk, gesture, writing, or drawing. Expressing a desire to die
Suicide Plan	Having a plan for suicide and/or obtaining the means to follow through on a suicidal attempt
Unbearable Pain	Often as the result of a loss/crisis. Expressing they are suffering and feel hopeless.
Signs of Depression	Apathy, loss of interest in activities they used to enjoy, withdrawing from others, changes in mood, prolonged sadness, changes in eating habits or sleeping patterns, etc.
Making Final Arrangements	Saying good-bye as if they won't be seeing someone again. Giving away favorite possessions
Self-destructive Behavior	Start of or increase in actions such as alcohol use, drug use, risky sexual behaviors, or reckless driving
Changes in Behavior	Such as pulling away from family, friends or social groups; anger or hostility; extreme mood swings

Intervention Protocol

Staff report every time there is an indication of risk such as directly or indirectly expressing suicidal thought (ideation) or other clues or warning signs. Every time there is a report, the school screener must conduct a risk screening and take appropriate action. If imminent danger exists, phone 911 immediately.

SCHOOL-BASED SUICIDE INTERVENTION PROCESS

Adapted from Willamette ESD for Pendleton School District

Situations could include:

- Ingested medication or other harmful substance
- Attempt to leave campus
- Threats with a weapon
- Unconscious due to attempt
- Any medical or life threatening circumstance

SUICIDAL EVENT RECOGNIZED (ATTEMPT, GESTURE OR THOUGHTS)

If no imminent danger, Proceed with Suicide Risk Assessment Level 1

IMMEDIATELY REPORT EVENT TO SCHOOL COUNSELOR OR ADMINISTRATOR (DO NOT EMAIL OR LEAVE VOICEMAIL, CONTACT SOMEONE IN PERSON ASAP)

IMMINENT DANGER CALL 911

SUICIDE RISK ASSESSMENT: Level 1 (By trained School Staff member)

SUICIDE RISK ASSESSMENT: Level 2 By mental health professional

- Screener uses screening form to interview student
- Safety Plan
- Screener contacts parents to inform and obtain information
- Screener consults with school team to determine whether Level 2 Suicide Risk Assessment is needed
- Screener informs administrator of screening results

STUDENT SAFETY PLAN:

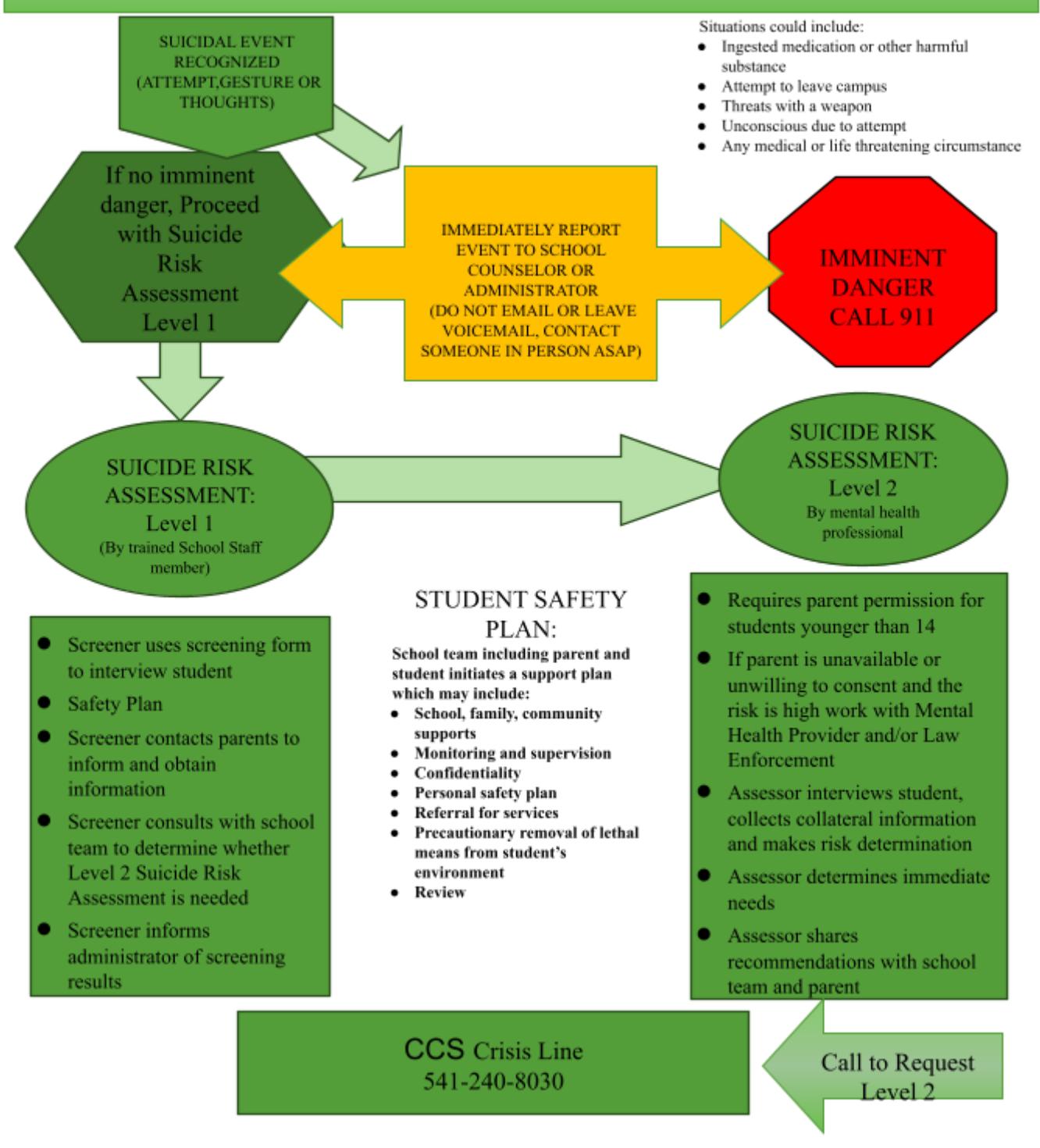
School team including parent and student initiates a support plan which may include:

- School, family, community supports
- Monitoring and supervision
- Confidentiality
- Personal safety plan
- Referral for services
- Precautionary removal of lethal means from student's environment
- Review

- Requires parent permission for students younger than 14
- If parent is unavailable or unwilling to consent and the risk is high work with Mental Health Provider and/or Law Enforcement
- Assessor interviews student, collects collateral information and makes risk determination
- Assessor determines immediate needs
- Assessor shares recommendations with school team and parent

CCS Crisis Line 541-240-8030

Call to Request Level 2



STEPS TO HELP A SUICIDAL STUDENT Take all suicidal behavior seriously		
1	Ask:	Express your concern about what you are observing in a calm and caring way, ask them “are you thinking about killing yourself?”
2	Keep Them Safe	Reduce access to lethal items or places. Stay with them in a safe space away from other students for privacy and away from lethal items or places
3	Be There	Stay with the student, listen and express care can concern, allow them to talk and express their feelings without judgment
4	Help Them Connect	Call and get help from the School Counselor or School Administrator. If immediate help is going to be a while and they don’t want to talk with you, you can help them call the National Suicide Prevention Line (1-800-273-TALK) or text (741741).
5	Stay Connected	Check back in after the crisis has past, continue to show you sincerely care about them and their well being

Risk Screening Process

Every time a student or staff member reports there is a concern for risk of suicide the school counselor or administrator conduct an initial Level 1 Risk Screening to determine next steps by conferring with the school team. Based on the outcome of this screening they may refer the student for a Level 2 Risk Assessment by a qualified mental health provider and/or develop an individualized support plan for their social emotional needs.

Level 1 Risk Screening

Trained School Screener interviews student using the screening form (see Appendix)

Screener contacts guardian to inform and obtain further information

Screener determines need for Level 2 Risk Assessment based on level of concern

- Call Community Counseling Solutions Crisis Line 541-240-8030 to request
- Screener consults with another trained screener prior to making a decision not to proceed to a Level 2 Risk Assessment

Screener informs school administrator of screening results

Screener and/or school administrator brings a team together to develop and initiate a support plan

Level 2 Risk Assessment

Conducted by a qualified mental health provider

- Call Community Counseling Solutions Crisis Line 541-240-8030 to request

Obtains guardian permission for any student younger than 14 unless imminent danger supersedes and they are unable to obtain

Assessor interviews student, collects collateral information from other pertinent sources and makes a risk determination

Assessor determines immediate need for intervention (i.e. in-home or out-of-home respite, hospitalization, etc.)

Assessors shares concerns and recommendations with the school team and guardian

Student Safety/Support Plan

Developed with the school team, parent/guardian and student

Done for all levels of risk to ensure safety and wellbeing of the student

Contains school, family and community components

May include: Monitoring and supervision, confidentiality, personal safety plan, referral to other sources of support, precautionary removal of lethal means from student's environment

Reviewed on a regular basis until the plan is no longer necessary

Parent/Guardian Responsibility

If a student is determined to be at risk, the principal or designee will contact the parent/guardian and:

1. Ask the parent/guardian whether he/she is aware of the student's mental state;
2. Ask the parent/guardian how he/she will obtain mental counseling or appropriate support for the student;
3. Provide names of community counseling resources, if appropriate, and offer to facilitate the referral;
4. Determine the parent's/guardian's intent to seek appropriate services for the student; and
5. Determine as necessary, with the parent/guardians, a method of transport for the student.

Post-Event (following a completed or attempted suicide)

In the event that a suicide occurred or is attempted, the principal or designee will follow the crisis intervention procedures contained in the school safety plan. After consultation with the Superintendent or designee and the student's parents/guardians about facts that may be divulged in accordance with the laws governing confidentiality of student record information, the principal or designee may provide students, parents/guardians, and staff with information, counseling and/or referrals to community agencies as needed. School administrators may receive assistance from school counselors or other mental health professional in determining how best to discuss the suicide or attempted suicide with student and staff. Following a suicide, the district will also assess the impact within all schools and the local community and provide appropriate information and support.

Key Points

- Support the grieving process
 - Address all deaths in a similar manner
 - Reduce stigma around suicide deaths by using a similar approach to other death occurrences
- Prevent imitative suicides
 - Identify and refer at-risk survivors and reduce identification with the victim
 - Be aware that adolescents and others associated with the event are vulnerable to suicide contagion (increased risk for suicide)
- Re-establish healthy school climate
 - Do not "glorify" the suicide
 - Talk sensitively about the event
- Utilize all available resources
- Provide long-term surveillance

Protocol

- Verify Suicide Information
- Estimate level of response required
- Determine what and how to share information-DO NOT release information in a large assembly or over the intercom
- Mobilize Crisis Response Team
- Identify at-risk students and staff

- Implement crisis response plans
- Monitor student and staff needs
- Review Prevention and Intervention plans to ensure safety and wellbeing of students and staff for several months following the event

Risk Mitigation

- IDENTIFY students/staff:
 - witnessing the event or it's aftermath
 - with a personal connection or relationship with the deceased
 - with previous suicidal behavior
 - with a history of mental illness
 - with previous experience with loss by suicide or any other loss
- MONITOR
 - Staff/students absent in the days following the event
 - Students with a history of being bullied
 - Staff/students in groups with higher risk such as LGBTQ+, Black Indigenous, or People of Color
 - Staff/students lacking an adequate system of social/familial support
- NOTIFY
 - Parents of highly affected students
 - Staff/students of community based mental health services
 - Staff/students of events or meetings for processing grief
 - Staff/students of funeral services or memorials held by family
 - Media, law enforcement, and community agencies to the extent necessary and appropriate

CAUTIONS:

- ❖ Avoid romanticizing or glorifying event
- ❖ Do **not** vilify the victim
- ❖ Do **not** provide excessive details, describe the event as courageous or rational
- ❖ Do **not** conduct on site school based memorial/funeral services or eulogies
- ❖ Try to maintain routines while addressing the grief and loss of students

Communications

The district's suicide/self-harm prevention policy and procedure will be available for all staff, students and community through the student, staff, volunteer, and parent/guardian handbooks and in school and district offices. All requests for specific information regarding an incident will be directed to the building principal or designee. This information can also be found on the website.

Resources

The district will utilize school counselors, school psychologists, the crisis telephone hotline, physician/health care providers, mental health specialists, coaches and youth leaders, parents and clergy as resources for

prevention and intervention. The district will also develop partnerships with community organizations and agencies. Community resources include:

Prevention Resources:

- Youth suicide prevention program:
<https://youth.gov/youth-topics/youth-suicide-prevention/preventing-youth-suicide>
- State department of health:
<https://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/SAFELIVING/SUICIDEPREVENTION/Pages/index.aspx>
- 211 system: Free confidential helpline
- Local Community Mental Health Center: 541-276-6207
- Yellowhawk Tribal Health Center 541-240-8696
- Youthline, phone, text & chat support: call 1-877-968-8491; Text “teen2teen” to 839863; Chat at www.oregonyouthline.org
- National Suicide & Crisis Lifeline call or text 988

Crisis Response Resources

- Emergency Response: 911
- Local Crisis Hotline: 541-240-8030
- Safe Oregon: 1-844-472-3367
- Local Community Mental Health Center: 541-276-6207
- Youthline, phone, text & chat support: call 1-877-968-8491; Text “teen2teen” to 839863; Chat at www.oregonyouthline.org
- National Suicide & Crisis Lifeline call or text 988

APPENDIX

SUICIDE QUESTIONNAIRE

Pendleton School District Suicide Questionnaire

Screener Name: _____ Date: _____

Student Name: _____

COLUMBIA-SUICIDE SEVERITY RATING SCALE

Screen Version - Recent

SUICIDE IDEATION DEFINITIONS AND PROMPTS	Past Month	
	Yes	No
Ask Questions that are bold and underlined		
<u>1. Have you wished you were dead or wished you could go to sleep and not wake up?</u>		
<u>2. Have you actually had any thoughts of killing yourself?</u>		
If YES to question 2, ask questions 3-6. If no to question 2, go directly to question 6		
<u>3. Have you been thinking about how you might do this?</u> E.g. "I thought about taking an overdose but I never made a specific plan as to when, where or how I would actually do it...and I would never go through with it."		
<u>4. Have you had these thoughts and had some intention of acting on them?</u> (As opposed to "I have the thoughts but I definitely will not do anything about them.")		
<u>5. Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry this out?</u>		
<u>6. Have you ever done anything, started to do anything, or prepared to do anything to end your life?</u> Examples: collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, took out pills but didn't swallow any, held a gun but changed your mind or it was grabbed from your hand, went to the roof but didn't jump; or actually took pills, tried to shoot yourself, cut yourself, tried to hang yourself, etc. If YES, ask: <u>Was this within the past three months?</u>		

	Low Risk
	Moderate Risk
	High Risk

Notes:

Action:

For inquiries and training information contact: Kelly Posner, Ph.D.

New York State Psychiatric Institute, 1051 Riverside Drive, New York, New York, 10032; posnerk@nyspi.columbia.edu

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SAMPLE 1 SAFETY PLAN FOR SUICIDE PREVENTION TEMPLATE STUDENT COPING PLAN

Student name: _____ DOB: _____ Date of Plan: _____

Warning signs I am not safe:

- 1.
- 2.
- 3.

Things I can do to keep myself safe:

- 1.
- 2.
- 3.

An adult I can talk to at home when I feel it would be better if I weren't alive:

An adult I can talk to at school when I feel it would be better if I weren't alive:

My plan to stop/reduce using drugs and alcohol:

- 1.
- 2.
- 3.

Identify reasons for living:

- 1.
- 2.
- 3.

Student will:

- 1.
- 2.
- 3.

Parent will:

- 1.
- 2.
- 3.

School will:

- 1.
- 2.
- 3.

I can call these numbers 24 hours a day for Crisis Support:

National Suicide Prevention Lifeline 1-800-273-TALK (8255) Espanol 1-888-628-9454

Oregon Youth line 1-877-968-8491 or text teen2teen to 839-863

Umatilla Crisis Line 541-240-8030

Pendleton Police Department 541-276-4411

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Counselor Signature: _____ Date: _____

Admin Signature: _____ Date: _____

My follow-up appointment is (Date): _____ With: _____

EXAMPLE SAFETY PLAN FOR SUICIDE PREVENTION STUDENT COPING PLAN

Name _____ Date _____

I _____ agree to do the following as part of my Safety Plan:

At home

- Always be with someone
- I will not be alone
- Weapons, sharp objects, and pills will be locked up
- Contact the school if I am going to be absent
- All medication will be handled and dispersed by an adult
- Will make and follow up with counseling/doctor appointments
- Will check in with _____ if I am feeling down
- If I feel suicidal, I will call 911.

The Student

- Will attend classes.
- If needed, will have an escort to the counseling office.
- Attend school
- Tell my teacher where I am at all times
- I will not have pills or weapons in my possession
- All medication will be handled and dispersed by an adult
- Will check in with _____ if I am feeling down

The School

- If absent, the attendance office will call home
- Do random backpack checks if needed
- Have a safe place to check-in

Adult(s) I can talk to at the school _____

Adult(s) I can talk to outside of school _____

To reduce my stress and keep myself calm I will:

Things I can do to keep myself safe:

Things that have worked in the past:

Student Signature _____ Date _____

Parent Signature _____ Date _____

Teacher Signature _____ Date _____

SAMPLE 2 SAFETY PLAN FOR SUICIDE PREVENTION TEMPLATE
STUDENT COPING PLAN

Name _____ Date _____

I _____ agree to do the following as part of my Safety Plan:

At home

The Student

The School

Adult(s) I can talk to at the school _____

Adult(s) I can talk to outside of school _____

To reduce my stress and keep myself calm I will:

Things I can do to keep myself safe:

Things that have worked in the past:

Student Signature _____

Date _____

Parent Signature _____

Date _____

Teacher Signature _____

Date _____